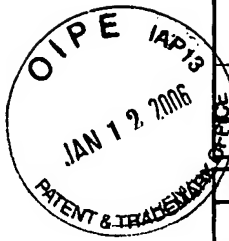


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PTO/SB/17 (12-04v2)

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| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).   |                     | Complete if Known            |   |                                |                         |                                      |                       |
|---|---------------------|------------------------------|---|--------------------------------|-------------------------|--------------------------------------|-----------------------|
| <b>FEE TRANSMITTAL</b><br><b>For FY 2005</b>  |                     | Application Number           | 10/088,014-Conf. #4932                                  |                                |                         |                                      |                       |
|   |                     | Filing Date                  | March 14, 2002  |                                |                         |                                      |                       |
|   |                     | First Named Inventor         | Yoshihisa YAMADA  |                                |                         |                                      |                       |
|   |                     | Examiner Name                | B. M. Senfi   |                                |                         |                                      |                       |
|   |                     | Art Unit                     | 2613  |                                |                         |                                      |                       |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  | Attorney Docket No. | 1163-0396P                   |   |                                |                         |                                      |                       |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |                     | <b>(\$)</b>                  | 1,810.00  |                                |                         |                                      |                       |
| <b>METHOD OF PAYMENT</b> (check all that apply)   |                     |                              |   |                                |                         |                                      |                       |
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____   |                     |                              |   |                                |                         |                                      |                       |
| <input type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>  |                     |                              |   |                                |                         |                                      |                       |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |                     |                              |   |                                |                         |                                      |                       |
| <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>   |                     |                              |   |                                |                         |                                      |                       |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments   |                     |                              |   |                                |                         |                                      |                       |
| <b>FEE CALCULATION</b>  |                     |                              |   |                                |                         |                                      |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |                              |   |                                |                         |                                      |                       |
|   | <b>FILING FEES</b>  |                              | <b>SEARCH FEES</b>                                      |                                | <b>EXAMINATION FEES</b> |                                      |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b> | <b>Fee (\$)</b>   | <b>Small Entity Fee (\$)</b>   | <b>Fee (\$)</b>         | <b>Small Entity Fee (\$)</b>         | <b>Fees Paid (\$)</b> |
| Utility   | 300                 | 150                          | 500   | 250                            | 200                     | 100                                  |                       |
| Design  | 200                 | 100                          | 100   | 50                             | 130                     | 65                                   |                       |
| Plant   | 200                 | 100                          | 300   | 150                            | 160                     | 80                                   |                       |
| Reissue   | 300                 | 150                          | 500   | 250                            | 600                     | 300                                  |                       |
| Provisional   | 200                 | 100                          | 0   | 0                              | 0                       | 0                                    |                       |
| <b>2. EXCESS CLAIM FEES</b>   |                     |                              |   |                                |                         |                                      |                       |
| <b>Fee Description</b>  |                     |                              |   | <b>Fee (\$)</b>                |                         | <b>Small Entity Fee (\$)</b>         |                       |
| Each claim over 20 (including Reissues)   |                     |                              |   | 50                             |                         | 25                                   |                       |
| Each independent claim over 3 (including Reissues)  |                     |                              |   | 200                            |                         | 100                                  |                       |
| Multiple dependent claims   |                     |                              |   | 360                            |                         | 180                                  |                       |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>          | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b>           |                         | <b>Multiple Dependent Claims</b>     |                       |
| 12  |                     | - 20 =                       | x   |                                |                         | <b>Fee (\$)</b> <b>Fee Paid (\$)</b> |                       |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>          | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b>           |                         |                                      |                       |
| 3   |                     | - 3 =                        | x   |                                |                         |                                      |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |                              |   |                                |                         |                                      |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |                              |   |                                |                         |                                      |                       |
| <b>Total Sheets</b>   |                     | <b>Extra Sheets</b>          | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b>    |                                      |                       |
|   |                     | - 100 =                      | /50   | (round up to a whole number) x |                         |                                      |                       |
| <b>4. OTHER FEE(S)</b>  |                     |                              |   |                                |                         | <b>Fees Paid (\$)</b>                |                       |
| Non-English Specification: \$130 fee (no small entity discount)   |                     |                              |   |                                |                         |                                      |                       |
| Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...   |                     |                              |   |                                |                         | 790.00                               |                       |
| 2253 Extension for response within third month  |                     |                              |   |                                |                         | 1,020.00                             |                       |
| <b>SUBMITTED BY</b>   |                     |                              |   |                                |                         |                                      |                       |
| Signature   |                     |                              | Registration No. (Attorney/Agent)                       | 40,439                         | Telephone               | (703) 205-8035                       |                       |
| Name (Print/Type)   | D. Richard Anderson |                              | Date  | January 12, 2006               |                         |                                      |                       |